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**FACSIMILE TRANSMISSION COVER SHEET**

Date: April 11, 08

To: United States Patent and Trademark Office  
Examiner: Chawan, Vijay B.; Art Unit: 2626

Fax: (571) 273-8300

Re: **Application Serial No.: 10/799,505**  
Filing Date: 3/11/2004; First-Named Inventor: Gao  
Attorney Docket No.: 0160114

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 12

Message:

Enclosed please find the Amendment after Notice of Allowance under 37 CFR § 1.312.

Thank you.

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Attorney Docket No.: 0160114

**AMENDMENT COVER SHEET**

IN RE APPLICATION OF: Yang GaoSERIAL NO.: 10/799,505 FILED: 3/11/2004FOR: Simple Noise Suppression Model

HONORABLE COMMISSIONER FOR PATENTS  
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	460.00	230.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,050.00	525.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,640.00	820.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00
☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	18	MINUS **20	* = 0	x 50	x 25	\$
INDEPENDENT	3	MINUS ***3	* = 0	x 210	x 105	\$
First presentation of multiple dependent claim				+ 370	+ 185	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

\* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.

\*\* If the number of Total Claims previously paid for is less than 20, write "20" in this space.

\*\*\* If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

03M0011/US

Attorney Docket No.: 0160114

- ☐ Enclosed is the total fee of \$ \_\_\_\_\_ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-1867 in the amount of \$ \_\_\_\_\_
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-1867. A duplicate copy of this sheet is enclosed.

Date:

4/11/08

By:

Farshad Farjani, Reg. No. 41,014

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being filed by facsimile transmission to United States Patent and Trademark Office at facsimile number 571-273-8300 on the date stated below. The facsimile transmission report indicated that the facsimile transmission was successful.

Date

4/11/08

Signature

Marci M. Sweda

Name of Person Performing Facsimile Transmission

Farshad Farjani, Esq.  
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Attorney Docket No.: 0160114

**APR 11 2008**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: **Yang Gao**

Serial No.: **10/799,505**

Filed: **March 11, 2004**

For: **SIMPLE NOISE SUPPRESSION  
MODEL**

Art Unit: 2626

Examiner: Chawan, Vijay B.

**AMENDMENT AFTER NOTICE OF ALLOWANCE UNDER 37 CFR § 1.312**

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment is pursuant to 37 CFR § 1.312 after the Notice of Allowance of February 27, 2008. Please enter and consider the following amendments and remarks.